



## APPLICATION FOR BOARDS & COMMISSIONS

Name \_\_\_\_\_ Date \_\_\_\_\_

Street Address \_\_\_\_\_

Mailing Address (if different from above)

\_\_\_\_\_

\_\_\_\_\_

Phone # \_\_\_\_\_ Email \_\_\_\_\_

Board or Commission for which you are applying \_\_\_\_\_

Other Boards, Committees or commissions on which you would be willing to serve:

\_\_\_\_\_

Current Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

1. Length of residence in Duvall \_\_\_\_\_

Previous address if less than 1 year at current address:

\_\_\_\_\_

2. Reason you are interested in serving in this position: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. What community activities or other experience do you bring to this position? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. Do you have any special skills or expertise applicable to this position? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Educational/Occupational Background: \_\_\_\_\_

\_\_\_\_\_

Are you available for evening meetings? \_\_\_\_\_ Daytime meetings? \_\_\_\_\_

Are there any evenings or days that are unacceptable? \_\_\_\_\_

Signature \_\_\_\_\_

Return form to: City of Duvall, 15535 Main Street NE, PO Box 1300, Duvall, WA 98019

Fax Number 425-788-8097

THANK YOU FOR YOUR INTEREST IN SERVICE TO OUR COMMUNITY!